TO: (Name, office symbol, room number, building, Agency/Post)

Action	File	Note and Return
Approval	For Clearance	Per Conversation
As Requested	For Correction	Frepare Reply
Circulate	For Your Information	Sea Me
Comment	Investigate	Signature
Coordination	Justify	
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NOT use this form	as a RECORD of approvals learances, and similar action	, concurrences, disp
OM: (Name, org. symb		Room NoBlo
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		Phone No.

Date

Initials